



North Carolina Department of Health and Human Services
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Michael F. Easley, Governor
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Stephanie M.

Memorandum

To: State Psychiatric Hospitals, Private Psychiatric Hospitals, Inpatient Psychiatric Units

From: Stephanie Alexander, Chief, MH Licensure & Certification Section

Date: November 21, 2006

Re: Death Reporting Requirements

This memorandum is to provide an update regarding death reporting requirements in accordance with General Statute 122C and pursuant to 42 CFR 482.13(f)(7). Attached you will find an updated Death Report Form to DHHS. This form may be used to comply with state and federal requirements.

State Requirements

As per G.S. 122C-31, as the designee of the Secretary, facilities shall notify DFS as follows:

"...immediately upon the death of any client of the facility that occurs within seven days of physical restraint or seclusion of the client, and shall notify the Secretary within three days of the death of any client of the facility resulting from violence, accident, suicide, or homicide."

Federal Requirements

As per 42 CFR 482.13(f)(7), facilities shall notify CMS as follows:

"The hospital must report to CMS any death that occurs while a patient is restrained or in seclusion, or where it is reasonable to assume that a patient's death is a result of restraint or seclusion."

See attached CMS Survey and Certification memo 06-31 that outlines the federal death restraint/seclusion death reporting responsibilities.

The CMS Regional Office Contact for death reporting is:

Janetta Booker

404-562-7343

Janetta.Booker@cms.hhs.gov

If you have any questions about this information, please contact me at 919-855-3796, or via e-mail at Stephanie.Alexander@ncmail.net

